Approved for use through 7/31/2006 CMB 0651-0032 U.S. Potent and Tradement Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless 8 displays a valid CMB control number. Submitute for Form PTO-875 Application or Docker "umber Effective December 8, 2004 APPLICATION AS FILED - PART I (Column 1) (Column 2) OTHER THAN SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED HUMBER EXTRA BASIC FEE RATE (\$) (37 CFR 1 16(4) (b) or (c)) FEE (1) NVA RATE (\$) N/A SEARCH FEE FEE (S) NA 150.00 (37 CFR 1 16(N. H) or (m)) NIA N/A 300.00 N/A EXAMINATION FEE NA \$250 (37 CFR 1 10(0). (p). or (q)) N/A NA \$500 N/A TOTAL CLAIMS NA \$100 (37.CFR 1 16(1) NA \$200 minus 20 = INDEPENDENT CLAIMS X\$ 25 X\$50 (37 CFR 1 16(N)) OR minus 3 X100 If the specification and drawings exceed 100 X200 APPLICATION SIZE sheets of paper, the application size fee due FEE . (37 CFR 1 16(4)) is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR | 1641) +180= * If the difference in column 1 is less than zero, enter *0* in column 2. +360= TOTAL APPLICATION AS AMENDED - PART II TOTAL (Column 1) (Column 2) (Column 3): CLAIMS SMALL ENTITY OR OTHER THAN HIGHEST REMAINING SMALL ENTITY NUMBER PRESENT ENDMENT AFTER RATE (\$) PREVIOUSLY ADDI-AMENDMENT **EXTRA** RATE(\$) PAID FOR Total CIR .10(in TIONAL Minus FEE (\$) TIONAL. H FEE (1) Independent D7 CFR 1.10(h) X\$ 25 Minus X\$50 OR X100 Application Size Fee (37 CFR 1.16(s)) X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1) +180= +360= OR TOTAL TOTAL ADD'L FEE (Column 1) ADO'L FEE (Column 2) (Column 3) CLAIMS HIGHEST 0 REMAINING NUMBER PRESENT AFTER. RATE (\$) PREVIOUSLY ADDI-AMENDMENT **EXTRA** RATE (\$) PAID FOR TIONAL ADOI-Total (37 CFR. 1. 18(1)) Minus FEE (\$) TIONAL FEE (\$) Independent . (37 CER 1.140.1) X\$ 25 Minus X\$50 OR Application Size Fee (37 CFR 1.16(6)) X100 X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1)) +180= +360= OR TOTAL ' If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Braukette Bold For This I and produced by the Michael Number I TOTAL ADD'L FEE OR ADD'L FEE The Tighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

Is collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete.